



City of Milpitas

455 East Calaveras Boulevard, Milpitas, California 95035-5479
Finance Department: 408-586-3100, TDD 586-3013
www.ci.milpitas.ca.gov

CITY OF MILPITAS BUSINESS LICENSE RECORD CHANGE FORM Please Type or Print in Ink

Check All Boxes that Apply

Duplicate Certificate

Cancel Business License

Add/Delete Partner

Business Name Change

Reason: _____

**Change of Business Address or
Federal Tax Identification
Number requires new application**

Cancel Date: _____

Information currently listed on license

Business License # _____ Business Name _____

Requested Changes

Business Name _____

Add Partner (Use Separate Sheet if Necessary)

Owner(s) _____

Name: _____

Mailing Address _____

SSN: _____

City, State, Zip _____

DL# & State: _____

Type of Ownership: Individual Partnership

Signature: _____

Date: _____

State Board of Equalization Resale Permit#:

Delete Partner (Use Separate Sheet if Necessary)

Name: _____

Federal Tax Identification Number:

Signature: _____

Date: _____

I declare under penalty of perjury, that to the best of my knowledge and belief, the statements made herein are true.

Print Name: _____ Signature _____

Date _____ Title of Person Signing _____

FOR OFFICE USE ONLY

Received by: _____

Processed by: _____

Received date: _____

Date processed: _____

Amount paid: _____

Receipt No.: _____